



DPH ICD-10 IMPLEMENTATION PROJECT



ICD-10-CM CODING TRAINING WORKBOOK

FOR CHILDREN'S DEVELOPMENTAL SERVICES AGENCIES

WBS 2.5

Version 1.2

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Table of Contents

1.	ICD-10-CM: THE CHAPTERS	6
2.	ICD-10-CM: THE CHAPTER BLOCKS	7
2.1	CHAPTER 1 - CERTAIN INFECTIOUS AND PARASITIC DISEASES (A00-B99).....	7
2.2	CHAPTER 2 - NEOPLASMS (C00-D49)	8
2.3	CHAPTER 3 - DISEASES OF THE BLOOD AND BLOOD-FORMING ORGANS AND CERTAIN DISORDERS INVOLVING THE IMMUNE MECHANISM (D50-D89)	9
2.4	CHAPTER 4 - ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES (E00-E89).....	9
2.5	CHAPTER 5 - MENTAL, BEHAVIORAL AND NEURODEVELOPMENTAL DISORDERS (F01-F99).....	10
2.6	CHAPTER 6 - DISEASES OF THE NERVOUS SYSTEM (G00-G99).....	11
2.7	CHAPTER 7 – DISEASES OF THE EYE AND ADNEXA (H00-H59)	11
2.8	CHAPTER 8 - DISEASES OF THE EAR AND MASTOID PROCESS (H60-H95).....	12
2.9	CHAPTER 9 – DISEASES OF THE CIRCULATORY SYSTEM (I00-I99)	12
2.10	CHAPTER 10 – DISEASES OF THE RESPIRATORY SYSTEM (J00-J99).....	13
2.11	CHAPTER 11 – DISEASES OF THE DIGESTIVE SYSTEM (K00-K95)	13
2.12	CHAPTER 12 – DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE (L00-L99)	14
2.13	CHAPTER 13 – DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE (M00-M99).....	14
2.14	CHAPTER 14 – DISEASES OF THE GENITOURINARY SYSTEM (N00-N99).....	15
2.15	CHAPTER 15 – PREGNANCY, CHILDBIRTH AND THE PUERPERIUM (O00-O9A)	16
2.16	CHAPTER 16 – CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (P00-P96)	16
2.17	CHAPTER 17 – CONGENITAL MALFORMATIONS, DEFORMATIONS AND CHROMOSOMAL ABNORMALITIES (Q00-Q99)	17
2.18	CHAPTER 18 – SYMPTOMS, SIGNS AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED (R00-R99)	18
2.19	CHAPTER 19 – INJURY, POISONING, AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES (S00-T88) 19	
2.20	CHAPTER 20 – EXTERNAL CAUSES OF MORBIDITY (V01-Y99)	20
2.21	CHAPTER 21 – FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (Z00-Z99) 21	
3.	ICD-10-CM: THE BASICS	22
3.1	THE BASICS: REVIEW QUESTIONS	22
3.2	THE BASICS: CODING EXERCISES.....	24
3.3	THE BASICS: CODING STEPS	25
3.4	THE BASICS: CROSSWORD PUZZLE	26
4.	PART 1 – CHAPTERS 21 AND 18.....	28
4.1	PART 1: REVIEW QUESTIONS.....	28

ICD-10-CM Coding Training Workbook

4.2	PART 1: CODING EXERCISES	29
5.	PART 2 – CHAPTERS 16 AND 17.....	30
5.1	PART 2: REVIEW QUESTIONS.....	30
5.2	PART 2: CODING EXERCISES	31
6.	PART 3 – CHAPTERS 5, 6, 13	32
6.1	PART 3 : REVIEW QUESTIONS.....	32
6.2	PART 3: CODING EXERCISES	33
6.3	CHAPTER 6: CODING TIPS – DOMINANT/ NONDOMINANT	34
6.4	PART 3: NERVOUS SYSTEM CROSSWORD PUZZLE	35
7.	PART 4 – CHAPTERS 1, 2, 3, 4, 7, 8, 9, 10, 11, 12, 14, 15, 19, 20.....	38
7.1	PART 4: REVIEW QUESTIONS.....	38
7.2	PART 4: CODING EXERCISES	41
7.3	CHAPTER 4 - DOCUMENTATION TIPS: DIABETES	43
7.4	CHAPTER 4 – BODY MASS INDEX - ADULTS.....	44
7.5	CHAPTER 4 – BODY MASS INDEX - CHILDREN	45
7.6	CHAPTER 9: CODING TIPS – DOMINANT/ NONDOMINANT	47
7.7	CHAPTER 10: DOCUMENTATION TIPS – ASTHMA	47
7.8	CHAPTER 10: NHLBI ASTHMA SEVERITY CLASSIFICATION SCALE	48
7.9	CHAPTER 15 - DOCUMENTATION TIPS.....	49
7.10	CHAPTER 15 – ICD-9/ICD-10 COMPARISON OF GESTATIONAL DIABETES	50
7.11	CHAPTER 20 – INJURY CODING TIPS.....	51
7.12	PART 4: CHILDHOOD ILLNESSES AND DISEASES CROSSWORD PUZZLE.....	52
7.13	PART 4: ENT CROSSWORD PUZZLE.....	54
7.14	PART 4: ANATOMY OF THE EYE AND COMMON DISORDERS CROSSWORD PUZZLE.....	57
7.15	PART 4: CONGESTIVE HEART FAILURE CROSSWORD PUZZLE.....	59
7.16	PART 4: LOWER EXTREMITIES CROSSWORD PUZZLE.....	61
7.17	PART 4: GASTROINTESTINAL CROSSWORD PUZZLE.....	63
7.18	PART 4: ANATOMY AND COMMON PROBLEMS OF THE SKIN CROSSWORD PUZZLE.....	65

1. ICD-10-CM: The Chapters

Chapter #	Description	Range of Codes
1	Certain infectious and parasitic diseases	A00-B99
2	Neoplasms	C00-D49
3	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	D50-D89
4	Endocrine, nutritional and metabolic diseases	E00-E89
5	Mental, Behavioral and Neurodevelopmental disorders	F01-F99
6	Diseases of the nervous system	G00-G99
7	Diseases of the eye and adnexa	H00-H59
8	Diseases of the ear and mastoid process	H60-H95
9	Diseases of the circulatory system	I00-I99
10	Diseases of the respiratory system	J00-J99
11	Diseases of the digestive system	K00-K95
12	Diseases of the skin and subcutaneous tissue	L00-L99
13	Diseases of the musculoskeletal system and connective tissue	M00-M99
14	Diseases of the genitourinary system	N00-N99
15	Pregnancy, childbirth and the puerperium	O00-O9A
16	Certain conditions originating in the perinatal period	P00-P96
17	Congenital malformations, deformations and chromosomal abnormalities	Q00-Q99
18	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	R00-R99
19	Injury, poisoning and certain other consequences of external causes	S00-T88
20	External causes of morbidity	V00-Y99
21	Factors influencing health status and contact with health services	Z00-Z99

2. ICD-10-CM: The Chapter Blocks

2.1 Chapter 1 - Certain infectious and parasitic diseases (A00-B99)

A00-A09 Intestinal infectious diseases	B10 Other human herpes viruses
A15-A19 Tuberculosis	B15-B19 Viral hepatitis
A20-A28 Certain zoonotic bacterial diseases	B20 Human immunodeficiency virus [HIV] disease
A30-A49 Other bacterial diseases	B25-B34 Other viral diseases
A50-A64 Infections with a predominantly sexual mode of transmission	B35-B49 Mycoses
A65-A69 Other spirochetal diseases	B50-B64 Protozoal diseases
A70-A74 Other diseases caused by chlamydiae	B65-B83 Helminthiases
A75-A79 Rickettsioses	B85-B89 Pediculosis, acariasis and other infestations
A80-A89 Viral and prion infections of the central nervous system	B90-B94 Sequelae of infectious and parasitic diseases
A90-A99 Arthropod-borne viral fevers and viral hemorrhagic fevers	B95-B97 Bacterial and viral infectious agents
B00-B09 Viral infections characterized by skin and mucous membrane lesions	B99 Other infectious diseases

2.2 Chapter 2 - Neoplasms (C00-D49)

C00-C14 Malignant neoplasms of lip, oral cavity and pharynx	C73-C75 Malignant neoplasms of thyroid and other endocrine glands
C15-C26 Malignant neoplasms of digestive organs	C7A Malignant neuroendocrine tumors
C30-C39 Malignant neoplasms of respiratory and intrathoracic organs	C7B Secondary neuroendocrine tumors
C40-C41 Malignant neoplasms of bone and articular cartilage	C76-C80 Malignant neoplasms of ill-defined, other secondary and unspecified sites
C43-C44 Melanoma and other malignant neoplasms of skin	C81-C96 Malignant neoplasms of lymphoid, hematopoietic and related tissue
C45-C49 Malignant neoplasms of mesothelial & soft tissue	D00-D09 In situ neoplasms
C50 Malignant neoplasms of breast	D10-D36 Benign neoplasms, except benign neuroendocrine tumors
C51-C58 Malignant neoplasms of female genital organs	D3A Benign neuroendocrine tumors
C60-C63 Malignant neoplasms of male genital organs	D37-D48 Neoplasms of uncertain behavior, polycythemia vera & myelodysplastic syndromes
C64-C68 Malignant neoplasms of urinary tract	D49 Neoplasms of unspecified behavior
C69-C72 Malignant neoplasms of eye, brain and other parts of central nervous system	

2.3 Chapter 3 - Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)

D50-D53 Nutritional anemias	D70-D77 Other disorders of blood and blood-forming organs
D55-D59 Hemolytic anemias	D78 Intraoperative and postprocedural complications of the spleen
D60-D64 Aplastic and other anemias and other bone marrow failure syndromes	D80-D89 Certain disorders involving the immune mechanism
D65-D69 Coagulation defects, purpura and other hemorrhagic conditions	

2.4 Chapter 4 - Endocrine, Nutritional and Metabolic Diseases (E00-E89)

E00-E07 Disorders of thyroid gland	E40-E46 Malnutrition
E08-E13 Diabetes mellitus	E50-E64 Other nutritional deficiencies
E15-E16 Other disorders of glucose regulation and pancreatic internal secretion	E65-E68 Overweight, obesity and other hyperalimentation
E20-E35 Disorders of other endocrine glands	E70-E88 Metabolic disorders
E36 Intraoperative complications of endocrine system	E89 Postprocedural endocrine and metabolic complications and disorders, not elsewhere classified

2.5 Chapter 5 - Mental, Behavioral and Neurodevelopmental disorders (F01-F99)

F01-F09 Mental disorders due to known physiological conditions	F50-F59 Behavioral syndromes associated with physiological disturbances and physical factors
F10-F19 Mental and behavioral disorders due to psychoactive substance use	F60-F69 Disorders of adult personality and behavior
F20-F29 Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders	F70-F79 Intellectual disabilities
F30-F39 Mood [affective] disorders	F80-F89 Pervasive and specific developmental disorder
F40-F48 Anxiety, dissociative, stress-related, somatoform and other nonpsychotic mental disorders	F90-F98 Behavioral and emotional disorders with onset usually occurring in childhood and adolescence
	F99 Unspecified mental disorder

2.6 Chapter 6 - Diseases of the Nervous System (G00-G99)

G00-G09 Inflammatory diseases of the central nervous system	G50-G59 Nerve, nerve root and plexus disorders
G10-G14 Systemic atrophies primarily affecting the central nervous system	G60-G65 Polyneuropathies and other disorders of the peripheral nervous system
G20-G26 Extrapyrarnidal and movement disorders	G70-G73 Diseases of myoneural junction and muscle
G30-G32 Other degenerative diseases of the nervous system	G80-G83 Cerebral palsy and other paralytic syndromes
G35-G37 Demyelinating diseases of the central nervous system	G89-G99 Other disorders of the nervous system
G40-G47 Episodic and paroxysmal disorders	

2.7 Chapter 7 – Diseases of the eye and adnexa (H00-H59)

H00-H05 Disorders of eyelid, lacrimal system and orbit	H43-H44 Disorders of vitreous body and globe
H10-H11 Disorders of conjunctiva	H46-H47 Disorders of optic nerve and visual pathways
H15-H22 Disorders of sclera, cornea, iris and ciliary body	H49-H52 Disorders of ocular muscles, binocular movement, accommodation and refraction
H25-H28 Disorders of lens	H53-H54 Visual disturbances and blindness
H30-H36 Disorders of choroid and retina	H55-H57 Other disorders of eye and adnexa

ICD-10-CM Coding Training Workbook

H40-H42 Glaucoma	H59 Intraoperative and postprocedural complications and disorders of eye and adnexa, not elsewhere classified
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2.8 Chapter 8 - Diseases of the ear and mastoid process (H60-H95)

H60-H62 Diseases of external ear	H90-H94 Other disorders of ear
H65-H75 Diseases of middle ear and mastoid	H95 Intraoperative and postprocedural complications and disorders of ear and mastoid process, not elsewhere classified
H80-H83 Diseases of inner ear	

2.9 Chapter 9 – Diseases of the circulatory system (I00-I99)

I00-I02 Acute rheumatic fever	I30-I52 Other forms of heart disease
I05-I09 Chronic rheumatic heart diseases	I60-I69 Cerebrovascular diseases
I10-I15 Hypertensive diseases	I70-I79 Diseases of arteries, arterioles and capillaries
I20-I25 Ischemic heart diseases	I80-I89 Diseases of veins, lymphatic vessels and lymph nodes, not elsewhere classified
I26-I28 Pulmonary heart disease and diseases of pulmonary circulation	I95-I99 Other and unspecified disorders of the circulatory system

2.10 Chapter 10 – Diseases of the respiratory system (J00-J99)

J00-J06 Acute upper respiratory infections	J80-J84 Other respiratory diseases principally affecting the interstitium
J09-J18 Influenza and pneumonia	J85-J86 Suppurative and necrotic conditions of the lower respiratory tract
J20-J22 Other acute lower respiratory infections	J90-J94 Other diseases of the pleura
J30-K39 Other diseases of upper respiratory tract	J95 Intraoperative and postprocedural complications and disorders of respiratory system, not elsewhere classified
J40-J47 Chronic lower respiratory diseases	J96-J99 Other diseases of the respiratory system
J60-J70 Lung diseases due to external agents	

2.11 Chapter 11 – Diseases of the digestive system (K00-K95)

K00-K14 Diseases of oral cavity and salivary glands	K55-K64 Other diseases of intestines
K20-K31 Diseases of esophagus, stomach and duodenum	K65-K68 Diseases of peritoneum and retroperitoneum
K35-K38 Diseases of appendix	K70-K77 Diseases of liver
K40-K46 Hernia	K80-K87 Disorders of gallbladder, biliary tract and pancreas
K50-K52 Noninfective enteritis and colitis	K90-K95 Other diseases of the digestive system

2.12 Chapter 12 – Diseases of the skin and subcutaneous tissue (L00-L99)

L00-L08 Infections of the skin and subcutaneous tissue	L55-L59 Radiation-related disorders of the skin and subcutaneous tissue
L10-L14 Bullous disorders	L60-L75 Disorders of skin appendages
L20-L30 Dermatitis and eczema	L76 Intraoperative and postprocedural complications of skin and subcutaneous tissue
L40-L45 Papulosquamous disorders	L80-L99 Other disorders of the skin and subcutaneous tissue
L49-L54 Urticaria and erythema	

2.13 Chapter 13 – Diseases of the musculoskeletal system and connective tissue (M00-M99)

M00-M02 Infectious arthropathies	M60-M63 Disorders of muscles
M05-M14 Inflammatory polyarthropathies	M65-M67 Disorders of synovium and tendon
M15-M19 Osteoarthritis	M70-M79 Other soft tissue disorders
M20-M25 Other joint disorders	M80-M85 Disorders of bone density and structure
M26-M27 Dentofacial anomalies [including malocclusion] and other disorders of jaw	M86-M90 Other osteopathies
M30-M36 Systemic connective tissue disorders	M91-M94 Chondropathies
M40-M43 Deforming dorsopathies	M95 Other disorders of the musculoskeletal system and connective tissue

ICD-10-CM Coding Training Workbook

M45-M49 Spondylopathies	M96 Intraoperative and postprocedural complications and disorders of musculoskeletal system, not elsewhere classified
M50-M54 Other dorsopathies	M99 Biomechanical lesions, not elsewhere classified

2.14 Chapter 14 – Diseases of the genitourinary system (N00-N99)

N00-N08 Glomerular diseases	N40-N53 Diseases of male genital organs
N10-N16 Renal tubulo-interstitial diseases	N60-N65 Disorders of breast
N17-N19 Acute kidney failure and chronic kidney disease	N70-N77 Inflammatory diseases of female pelvic organs
N20-N23 Urolithiasis	N80-N98 Noninflammatory disorders of female genital tract
N25-N29 Other disorders of kidney and ureter	N99 Intraoperative and postprocedural complications and disorders of genitourinary system, not elsewhere classified
N30-N39 Other diseases of the urinary system	

2.15 Chapter 15 – Pregnancy, childbirth and the puerperium (O00-O9A)

O00-O08 Pregnancy with abortive outcome	O60-O77 Complications of labor and delivery
O09 Supervision of high risk pregnancy	O80-O82 Encounter for delivery
O10-O16 Edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium	O85-O92 Complications predominantly related to the puerperium
O20-O29 Other maternal disorders predominantly related to pregnancy	O94-O9A Other obstetric conditions, not elsewhere classified
O30-O48 Maternal care related to the fetus and amniotic cavity and possible delivery problems	

2.16 Chapter 16 – Certain conditions originating in the perinatal period (P00-P96)

P00-P04 Newborn affected by maternal factors and by complications of pregnancy, labor, and delivery	P50-P61 Hemorrhagic and hematological disorders of newborn
P05-P08 Disorders of newborn related to length of gestation and fetal growth	P70-P74 Transitory endocrine and metabolic disorders specific to newborn
P09 Abnormal findings on neonatal screening	P76-P78 Digestive system disorders of newborn
P10-P15 Birth trauma	P80-P83 Conditions involving the integument and temperature regulation of newborn

ICD-10-CM Coding Training Workbook

P19-P29 Respiratory and cardiovascular disorders specific to the perinatal period	P84 Other problems with newborn
P35-P39 Infections specific to the perinatal period	P90-P96 Other disorders originating in the perinatal period

2.17 Chapter 17 – Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)

Q00-Q07 Congenital malformations of the nervous system	Q50-Q56 Congenital malformations of genital organs
Q10-Q18 Congenital malformations of eye, ear, face and neck	Q60-Q64 Congenital malformations of the urinary system
Q20-Q28 Congenital malformations of the circulatory system	Q65-Q79 Congenital malformations and deformations of the musculoskeletal system
Q30-Q34 Congenital malformations of the respiratory system	Q80-Q89 Other congenital malformations
Q35-Q37 Cleft lip and cleft palate	Q90-Q99 Chromosomal abnormalities, not elsewhere classified
Q38-Q45 Other congenital malformations of the digestive system	

2.18 Chapter 18 – Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)

R00-R09 Symptoms and signs involving the circulatory and respiratory systems	R50-R69 General symptoms and signs
R10-R19 Symptoms and signs involving the digestive system and abdomen	R70-R79 Abnormal findings on examination of blood, without diagnosis
R20-R23 Symptoms and signs involving the skin and subcutaneous tissue	R80-R82 Abnormal findings on examination of urine, without diagnosis
R25-R29 Symptoms and signs involving the nervous and musculoskeletal systems	R83-R89 Abnormal findings on examination of other body fluids, substances and tissues, without diagnosis
R30-R39 Symptoms and signs involving the genitourinary system	R90-R94 Abnormal findings on diagnostic imaging and in function studies, without diagnosis
R40-R46 Symptoms and signs involving cognition, perception, emotional state and behavior	R97 Abnormal tumor markers
R47-R49 Symptoms and signs involving speech and voice	R99 Ill-defined and unknown cause of mortality

2.19 Chapter 19 – Injury, poisoning, and certain other consequences of external causes (S00-T88)

S00-S09 Injuries to the head	T15-T19 Effects of foreign body entering through natural orifice
S10-S19 Injuries to the neck	T20-T32 Burns and corrosions
S20-S29 Injuries to the thorax	T20-T25 Burns and corrosions of external body surface, specified by site
S30-S39 Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals	T26-T28 Burns and corrosions confined to eye and internal organs
S40-S49 Injuries to the shoulder and upper arm	T30-T32 Burns and corrosions of multiple and unspecified body regions
S50-S59 Injuries to the elbow and forearm	T33-T34 Frostbite
S60-S69 Injuries to the wrist, hand and fingers	T36-T50 Poisoning by, adverse effect of and underdosing of drugs, medicaments and biological substances
S70-S79 Injuries to the hip and thigh	T51-T66 Toxic effects of substances chiefly nonmedicinal as to source
S80-S89 Injuries to the knee and lower leg	T66-T78 Other and unspecified effects of external causes
S90-S99 Injuries to the ankle and foot	T79 Certain early complications of trauma
T07 Injuries involving multiple body regions	T80-T88 Complications of surgical and medical care, not elsewhere classified
T14 Injury of unspecified body region	

2.20 Chapter 20 – External Causes of Morbidity (V01-Y99)

V00-X58 Accidents	V70-V79 Bus occupant injured in transport accident
V00-V99 Transport accidents	V80-V89 Other land transport accidents
V00-V09 Pedestrian injured in transport accident	V90-V94 Water transport accidents
V10-V19 Pedal cycle rider injured in transport accident	V95-V97 Air and space transport accidents
V20-V29 Motorcycle rider injured in transport accident	V98-V99 Other and unspecified transport accidents
V30-V39 Occupant of three-wheeled motor vehicle injured in transport accident	W00-X58 Other external causes of accidental injury
V40-V49 Car occupant injured in transport accident	W00-W19 Slipping, tripping, stumbling and falls
V50-V59 Occupant of pick-up truck or van injured in transport accident	W20-W49 Exposure to inanimate mechanical forces
V60-V69 Occupant of heavy transport vehicle injured in transport accident	W50-W64 Exposure to animate mechanical forces

2.21 Chapter 21 – Factors influencing health status and contact with health services (Z00-Z99)

Z00-Z13 Persons encountering health services for examinations	Z40-Z53 Encounters for other specific health care
Z14-Z15 Genetic carrier and genetic susceptibility to disease	Z55-Z65 Persons with potential health hazards related to socioeconomic and psychosocial circumstances
Z16 Resistance to antimicrobial drugs	Z66 Do not resuscitate status
Z17 Estrogen receptor status	Z67 Blood type
Z18 Retained foreign body fragments	Z68 Body mass index (BMI)
Z20-Z28 Persons with potential health hazards related to communicable diseases	Z69-Z76 Persons encountering health services in other circumstances
Z30-Z39 Persons encountering health services in circumstances related to reproduction	Z77-Z99 Persons with potential health hazards related to family and personal history and certain conditions influencing health status

3. ICD-10-CM: The Basics

3.1 The Basics: Review Questions

1. The WHO version of ICD-10 has not been implemented in the United States

☐

True

☐False

2. All Codes in ICD-10-CM include full code titles

☐

True

☐False

3. The 2nd and 3rd characters of a code are always numeric

☐

True

☐False

4. 250.00 is a valid code in ICD-10-CM

☐

True

☐False

5. GEMs are a crosswalk between ICD-9-CM and ICD-10-CM

☐

True

☐False

6. NEC means “not elsewhere coded”

☐

True

☐False

7. Terms that appear in parentheses must appear in the diagnostic statement being coded

☐

True

☐False

8. An Excludes2 note represents Not Coded Here

☐

True

☐False

ICD-10-CM Coding Training Workbook

9. The point dash (.-) symbol indicates that the code is incomplete

☐

True

☐False

10. V and E codes from ICD-9-CM are supplemental classifications in ICD-10-CM

☐

True

☐False

11. For all codes that contain laterality, bilateral is always one of the options

☐

True

☐False

12. A symptom can never be the first-listed diagnosis

☐

True

☐False

13. Instructional notes never appear at the beginning of a Chapter

☐

True

☐False

14. Code extensions are always the 7th character

☐

True

☐False

15. Dummy placeholders are used when you have no clue what character to use

☐

True

☐False

16. Possible and Rule out diagnoses are coded

☐

True

☐False

3.2 The Basics: Coding Exercises

#	Diagnoses	Answer
1	Speech and language developmental delay disorder due to hearing loss	
2	Unspecified delay in development	
3	Receptive Language Disorder	
4	Delayed Milestones	
5	Lack of Coordination	
6	Down's Syndrome	
7	Autistic Disorder, Active State	
8	1-year old child with Failure to Thrive	
9	Microcephaly	

3.3 The Basics: Coding Steps

Below is the process to follow when looking up codes. It is essential to use both the Alphabetic Index and Tabular List when locating and assigning a code. The Alphabetic Index does not always provide the full code. Selection of the full code, including laterality and any applicable 7th character can only be done in the Tabular List. Even if a dash is not included at the Alphabetic Index entry, it is necessary to refer to the Tabular List to verify if a 7th character is required.

- A. Locate the main term in the Alphabetic Index
 - a. For Chest Cold, Look up “Cold” then go down list to find “Chest”
- B. Scan the main term entry for any instructional notes
 - a. “*see* Bronchitis” so look up “Bronchitis”
- C. In the diagnosis being coded, identify any terms that modify the main term
 - a. Nothing under “Bronchitis J40” relates back to Chest Cold
- D. Follow any cross-reference notes
- E. Always verify the code in the Tabular List
 - a. **Never** begin code searches using Tabular List – may lead to coding errors
 - b. Go to J40 in the Tabular
- F. Follow any instructional notes
 - a. Do any of the instructions apply to Chest Cold?
- G. Select the code
 - a. J40 is the correct code

ICD-10-CM Coding Training Workbook

ACROSS	DOWN
1. ICD-9-CM codes will not be accepted for services provided on or after _____ 1, 2014	2. True or False: Trimester has been added to obstetric codes in ICD-10-CM
3. In ICD-10-CM, codes longer than _____ characters always have a decimal point before the next character	4. With regard to healthcare claims transactions, how many code sets will be implemented in the US on Oct.1, 2014
6. ICD-10-PCS procedure codes will not replace _____ codes for outpatient procedures	5. ICD-10-CM is required for any covered entities that must comply with _____
8. The first digit of an ICD-10-CM diagnosis code is always a _____	7. Is there a grace period for the use of ICD-9-CM codes submitted after the ICD-10-CM compliance date?
10. ICD-10 is a _____ coding system implemented by the World Health Organization in 1993 to replace ICD-9	9. True or False: All ICD-10-CM codes are 7 characters
11. ICD-10-CM codes can have a maximum of _____ characters	12. The United States will be the _____ industrialized country to adopt ICD-10 for morbidity reporting
15. ICD-10-CM is the Tenth Revision of the International Classification of Diseases, and replaced _____	13. The National Center for Health Statistics under the _____ is responsible for the development and maintenance of ICD-10-CM
	14. <i>ICD-10-CM Official Guidelines for Coding and Reporting</i> is a set of rules developed by _____ that complement the official conventions and instructions provided within the ICD-10-CM

4. Part 1 – Chapters 21 and 18

4.1 Part 1: Review Questions

1. Z codes are procedure codes

☐

True

☐False

2. A status code is distinct from a history code

☐

True

☐False

3. History codes are acceptable on any medical record regardless of the reason for visit

☐

True

☐False

4. The first time you see a child with spina bifida, you will code the encounter as a Screening

☐

True

☐False

5. The Alphabetical Index should be consulted to determine which symptoms and signs are to be allocated in Chapter 18 and which to other chapters

☐

True

☐False

6. Codes for signs and symptoms are not reported in addition to a related definitive diagnosis

☐

True

☐False

7. ICD-10-CM contains a number of combination codes that identify both the definitive diagnosis and common symptoms of that diagnosis

☐

True

☐False

4.2 Part 1: Coding Exercises

#	Scenario/Diagnosis	Answer
1	18 month old boy referred to CDSA by his family with concerns about overall development. Reportedly not showing interest in toys typical for his age. He is eating well, but is a messy eater with a tendency to play in his food. He uses a few words for items he likes- “ball” and “juice”. He was described as clumsy and “heavy handed” as he likes to hit toys and objects. The family’s primary concern is with his overall development. A developmental screening was performed and some milestone delays are noted. Further evaluation is needed.	
2	32 month old boy referred to CDSA by DSS. Primary concern is behavior. According to mother, child is very disorganized and shows limited attention to adults and verbal instructions. He is very active during meal times and will not sit at table to eat. He is reported to frequently become aggressive when interacting with peers.	
3	30 month old girl is being seen by physical therapist for complications of stroke. Therapist is working on ambulation with assistive technology.	
4	4 month old girl with Trisomy 21 with large ventricular septal defect, poor weight gain and exhibiting signs of mild congestive heart failure. Home visit done to assess developmental status and impact of medical conditions on development. Child has demonstrated increased respiratory rate, increased fatigue with feedings, and poor weight gain. Child also has noted hypotonia. Gross motor milestones are delayed.	

5. Part 2 – Chapters 16 and 17

5.1 Part 2: Review Questions

1. If a condition originates in the perinatal period and continues throughout the life of the client, the perinatal code should continue to be used regardless of client's age.

☐

True

☐False

2. When both birth weight and gestational age are available code one or the other but not both.

☐

True

☐False

3. When a malformation/deformation/or chromosomal abnormality does not have a unique code assignment, do not assign additional code(s) for any manifestations that may be present.

☐

True

☐False

4. Codes from Chapter 17 cannot be used after a client reaches age 18.

☐

True

☐False

5.2 Part 2: Coding Exercises

#	Scenario/Diagnosis	Answer
1	9-month old girl who was born prematurely at 32 weeks gestation. History of reflux, slow weight gain, head tilt to left. Referred for concern of delayed gross motor skills. Physical exam significant for occipital-parietal flattening on the right side (plagiocephaly) and mild torticollis. Review of systems and clinical observation with frequent spit-up (effortless emesis) and difficulties with spoon feedings. Evaluation notable for mild gross motor and fine motor delays.	
2	Almost 3-month old male born prematurely at 29 weeks gestation who was referred for concerns with extensor dominant preference and a decrease in his state regulation. During his hospitalization, he was hyper-reactive to environmental stimuli and he was slow to settle after being examined or handled. His mother reports that her son has seemed to settle down and is much easier to soothe now but her current concerns are about his head positioning since he prefers to keep it turned to the right and this is flattening the right side of his skull. All areas of his development were appropriate for his adjusted-age but plagiocephaly were noted. Review of child's medical records indicates a history of meningitis (E. coli bacteria) during the neonatal period that makes child eligible for the NC Infant Toddler program.	
3	2 month old male with cleft palate involving both the soft and hard palate, with bilateral cleft lip.	

6. Part 3 – Chapters 5, 6, 13

6.1 Part 3 : Review Questions

1. If a child recently lost their mother and appears to be depressed, clinicians should code this as F32.9, Major depressive disorder, single episode, unspecified
☐ True ☐ False

2. Codes in category, Behavioral and emotional disorders with onset usually occurring in childhood and adolescence (F90-F98) can be assigned to adults
☐ True ☐ False

3. The diagnostic term ‘developmental delay’ is sufficient to assign an appropriate ICD-10-CM code
☐ True ☐ False

4. Status epilepticus is a serious medical condition where prolonged or clustered seizures develop into non-stop seizures
☐ True ☐ False

5. If a 3 year old male falls down the steps and breaks a leg, the fracture will be coded from Chapter 13, Diseases of the Musculoskeletal System and Connective Tissue
☐ True ☐ False

6.2 Part 3: Coding Exercises

#	Scenario/Diagnosis	Answer
1	30-month old child referred for a developmental assessment to gain more information about developmental profile and ascertain if additional services need to be implemented to assist in achieving desired outcomes. Child has been enrolled in NC ITP for 11 months for developmental delays. Results of standardized testing found significant global developmental delays including a disordered communication profile. In addition, qualitative concerns regarding pragmatic language, social interactions, and restricted play skills were also noted. Child's profile was consistent with the diagnosis of autism.	
2	17-month old male referred for medical and physical therapy evaluations. Child was enrolled in the ITP a couple of months earlier due to developmental delays. Parents note that child's joints seem to pop a lot and he doesn't seem strong. He has a history of torticollis and plagiocephaly for which he has already been prescribed a molding helmet. Child has some difficulty chewing food. Results of today's physical therapy evaluation determined that child continues to have mild delays in his gross motor development with more significant difficulties noted in his stationary and object manipulation skills as compared to his locomotion abilities. In addition, low-normal muscle tone was noted. Besides the obvious torticollis and plagiocephaly, resultant mandibular asymmetry has created a significant malocclusion of his bite. Further consultation with a craniofacial specialist is warranted and PT is warranted.	

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#	Scenario/Diagnosis	Answer
3	21 month old girl is referred to the CDSA by her family with concerns about language development. She was not using gestures and no use of words was observed during testing. She would vocalize to protest and request. Her comprehension appeared in the overall average range for her age. She demonstrated low muscle tone and decreased trunk stability. Previous fine and gross motor testing reported significant motor delays. Adaptive scores were within the low average range. Some oral motor weakness was also noted as well as poor lip closure when chewing. The family's primary concern is communication and would like to focus outcomes on this area.	
4	Dystonic cerebral palsy	
5	Meningitis due to E.coli	
6	Spinal Muscular Atrophy	

6.3 Chapter 6: Coding Tips – Dominant/Nondominant

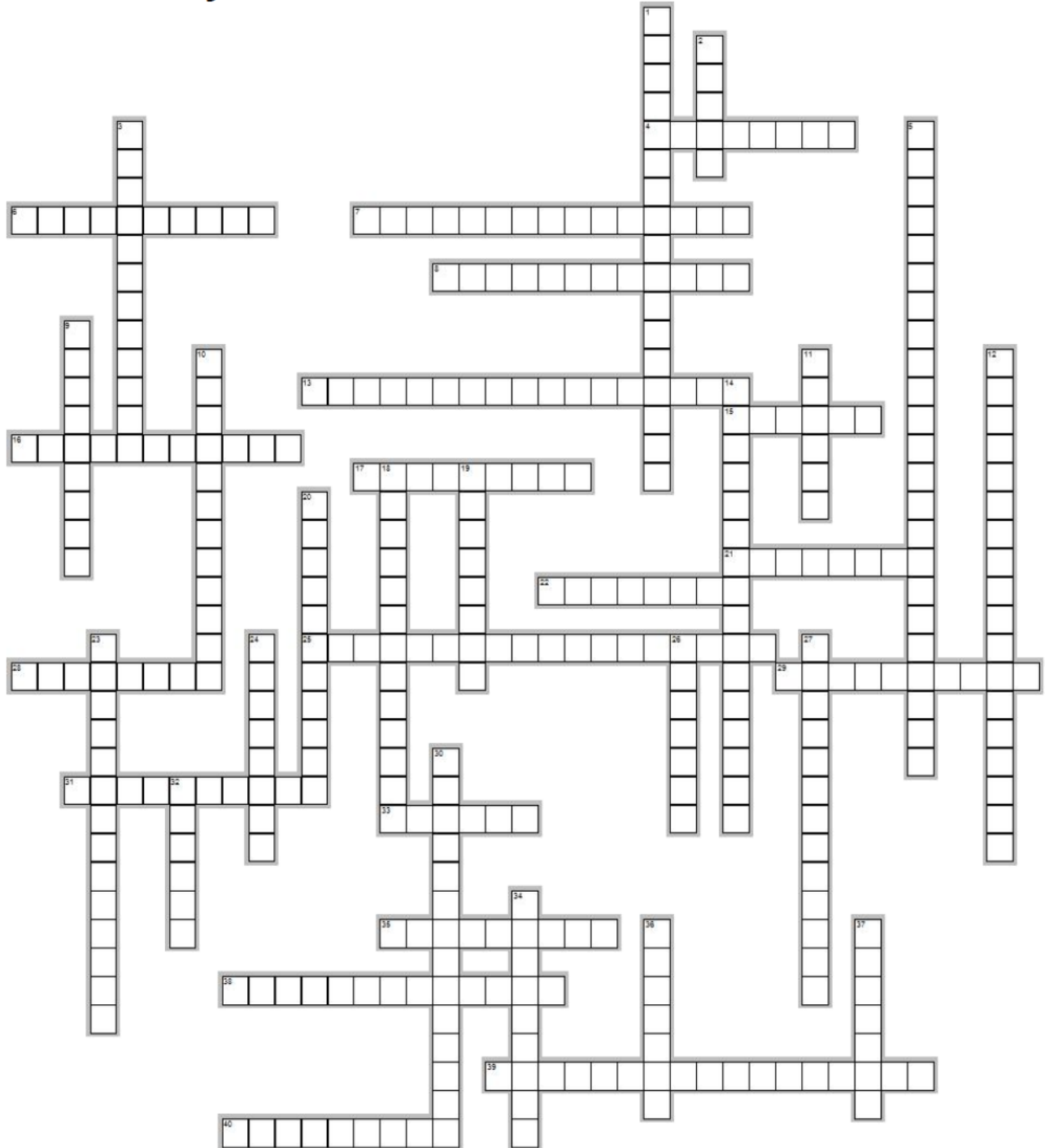
For codes that specify laterality with dominant or nondominant, and the classification system does not indicate a default, code selection is as follows:

- For ambidextrous patients, the default should be dominant
- If the left side is affected, the default is non-dominant
- If the right side is affected, the default is dominant

6.4 Part 3: Nervous System Crossword Puzzle

Refer to questions on following page

Nervous System Crossword Puzzle



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Clues for the Nervous System Crossword Puzzle

Across

- 4. Brain disorder causing recurring seizures (convulsions); causes include illnesses, brain injury, abnormal brain development, or unknown etiology
- 6. Continuation of the brain located within the vertebral canal, protected by the vertebral column; composed of gray matter(made up of neurons) & white matter (composed of nerve cells)
- 7. Autonomic nervous system sometimes referred to as the "rest & digest" system
- 8. Found in the cerebrum composed of the thalamus, hypothalamus, amygdala, & hippocampus
- 13. Inherited nerve disorder affecting the brain; most common symptoms are dementia & difficulty controlling movements (chorea)
- 15. Gland located in the Third Ventricle; secretes hormones including melatonin that regulates the sleep-wake cycle of the body
- 16. Activation of this autonomic nervous system results in "fight or flight" response causing the release of norepinephrine, adrenaline, & cortisol
- 17. Number (pair) of spinal nerves
- 21. Swelling/bulging of a weak area in the wall of a cerebral artery; most common location is at the Circle of Willis
- 22. Lobe of the brain for interpretation of language & words, spatial & visual perception
- 25. Hollow-filled cavities (2 Lateral, 1 Third, 1 Fourth) found in the brain & brainstem, filled with CSF
- 28. Protective covering of the brain & spinal cord composed of 3 layers: dura mater, arachnoid mater, & pia mater
- 29. Division of Nervous System primarily composed of spinal nerves, cranial nerves, & autonomic nervous system
- 31. Inflammation of the lining surrounding the brain & spinal cord, usually due to an infection
- 33. Brain infarction; due to sudden interruption of the blood flow & oxygen to an area of the brain (by a blood clot or bleeding)
- 35. Lobe of the brain for visual processing (color, light & movement)
- 38. Ribbon-like structure located in the ventricles, responsible for producing CSF
- 39. "Paralysis agitans"; progressive disorder of the nervous system affecting movement; s/s include rigidity, changes in speech & gait, tremor (most obvious sign)
- 40. Made up of 3 parts: midbrain, medulla oblongata, & pons; connects the cerebrum to the spinal cord; contains centers for autonomic functions- i.e. breathing, BP, HR, digestion

Down

- 1. Irreversible, progressive disease slowly destroying memory & other important mental functions
- 2. Bilaterally symmetric, soft gelatinous structure composed of cerebrum (cerebral cortex), cerebellum, & brainstem
- 3. Collection of 5 nuclei (caudate nucleus, putamen, globus pallidus, subthalamic nuclei, & substantia nigra) located on either side of the brain; controls cognition, movement coordination, & voluntary movement

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- 5. Bleeding occurs within the brain; traumatic or non-traumatic causes
- 9. "Pachymeninx"; outermost, toughest & most fibrous layer of the meninges
- 10. Inflammation of the brain tissue, usually from an infection
- 11. Number (pair) of cranial nerves
- 12. Clear, colorless fluid produced by the choroid plexus inside the ventricles that flows within & around the brain & spinal cord to cushion from injury
- 14. Bleeding between the dura & skull
- 18. "Water in the brain"; abnormal increase in the amount of CSF in the brain
- 19. Lobe of the brain contains the "Wernicke's Area" (understanding language); also for memory & hearing
- 20. Horseshoe-shaped structure located within the temporal lobe responsible for consolidating new memories, emotional responses, & spatial orientation
- 23. "Cerebral arterial circle"; anastomotic system of arteries in the cerebral area located at the inferior side of the brain
- 24. Loss of intellectual function & social skills severe enough to interfere with the person's daily life
- 26. Division of Nervous System primarily composed of brain & spinal cord
- 27. Swelling of the brain tissue due to injury or electrolyte imbalance
- 30. Thick band of nerve connecting both sides of the cerebral hemispheres
- 32. Nerve cell; serves as the chemical communication in the brain, conduct impulses & responds to stimuli
- 34. "Master gland"; located at the base of the skull (sella tursica) which secretes hormones that regulate other endocrine glands of the body
- 36. Inflammation & collection of pus, immune cells & other material in the brain, usually due to a bacterial or fungal infection
- 37. Lobe of the brain contains the "Broca's Area"; responsible for problem solving, judgment, emotion, speech, personality & behavior, emotions

7. Part 4 – Chapters 1, 2, 3, 4, 7, 8, 9, 10, 11, 12, 14, 15, 19, 20

7.1 Part 4: Review Questions

1. Before coding HIV positive, there must be a positive serology or culture for HIV in the client's record.

☐

True

☐False

2. If the documentation states the client has AIDS, always code B20, HIV disease.

☐

True

☐False

3. All neoplasms are coded in Chapter 2.

☐

True

☐False

4. Only one Diabetes Mellitus code can be assigned for each encounter.

☐

True

☐False

5. Type 2 Diabetes Mellitus is the default if Type is not documented.

☐

True

☐False

6. Code Z79.4, Long-term (current) use of insulin, is always used for all 5 categories of Diabetes Mellitus.

☐

True

☐False

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7. If Obesity is coded, the BMI must always be coded as well.

☐**True**☐**False**

8. Most codes in Chapter 7, Diseases of the Eye and Adnexa, include anatomic site and/or laterality.

☐**True**☐**False**

9. Hypertension is no longer classified by type such as benign, malignant or unspecified hypertension.

☐**True**☐**False**

10. If a 3 year old male falls down the steps and breaks a leg, the fracture will be coded from Chapter 13, Diseases of the Musculoskeletal System and Connective Tissue.

☐**True**☐**False**

11. All codes in Chapter 19 require an external cause code(s).

☐**True**☐**False**

12. For adverse effects due to drugs or chemicals, always begin with the Table of Drugs and Chemicals.

☐**True**☐**False**

13. The Table of Drugs and Chemicals is used to identify Chapter 20 codes.

☐**True**☐**False**

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14. Codes from Chapter 20 are used only with injury codes.

☐

True

☐

False

15. I sure am glad this is my last True/False Quiz!

☐

True

☐

False

7.2 Part 4: Coding Exercises

#	Scenario/Diagnosis	Answer
1	30-month old girl born full term but whose birth weight demonstrated intrauterine growth restriction. She was referred for a developmental assessment given concerns about expressive language and feeding difficulties. Child has a history of failure to thrive. She continued to have feeding difficulties but demonstrated stable weight gain. Acid reflux was diagnosed and medication was prescribed. Delayed gastric emptying was also diagnosed and medication was prescribed for that. Child has continued to resist some feedings and demonstrates a very poor appetite even if she is willing to accept the first bite. Assessment demonstrated significant delay in expressive language, mild delays in fine motor skills, receptive language, and overall cognitive skills. Volume limiting (self) was observed during mealtime but no oral-motor dysfunction was noted.	
2	2 yr old with Ullrich-Turner Syndrome was started on Androgen 3 days ago and is seen today for a rash that started out on face and stomach and has spread to arms and back. The mother reports no other changes in the child's diet or environmental factors so the Androgen was discontinued due to the adverse effect from the medication. The child developed AIDS in utero, has juvenile diabetes mellitus and insulin is administered via an insulin pump, and moderate nonproliferative diabetic retinopathy. The child will undergo surgery for a brain stem glioma in one week.	
3	21-month old male born full-term and perinatal period was uncomplicated other than poor feeding. Subsequent concerns about visual tracking arose and imaging studies demonstrated abnormalities with central nervous system. He has been diagnosed with obstructive hydrocephalus, cortical visual impairment, strabismus, feeding difficulties, oropharyngeal dysphagia, and developmental delays. Child has undergone placement of VP-shunt and strabismus surgery.	

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#	Scenario/Diagnosis	Answer
4	6-month old male initially seen last week for delays in physiological development. During the assessment, multiple bruises on buttocks and external genitalia were identified. DSS was contacted for suspected child abuse, physical & sexual. The mother and child are seen today in follow-up to the suspected abuse. The mother confirms that the biological father has been physically abusing the child.	
5	8-month old girl enrolled in the NC ITP with establishing condition of unilateral sensorineural hearing loss. She failed her newborn hearing screening x2 and was referred to UNC for an ABR. An MRI was performed and MOC reports that some “brain damage” was noted. She stated that she has been told that it was possibly due to a virus such as CMV. Child was already receiving direct PT for gross motor delays. Evaluation report noted low muscle tone too. Upon enrollment, review of medical records indicates mild-to-moderate hearing loss in right ear along with MRI findings of encephalomalacia involving of white matter in the anterior temporal lobes as well as mildly hypoplastic cerebellar vermis. Child noted to have probable delayed motor skills upon enrollment	

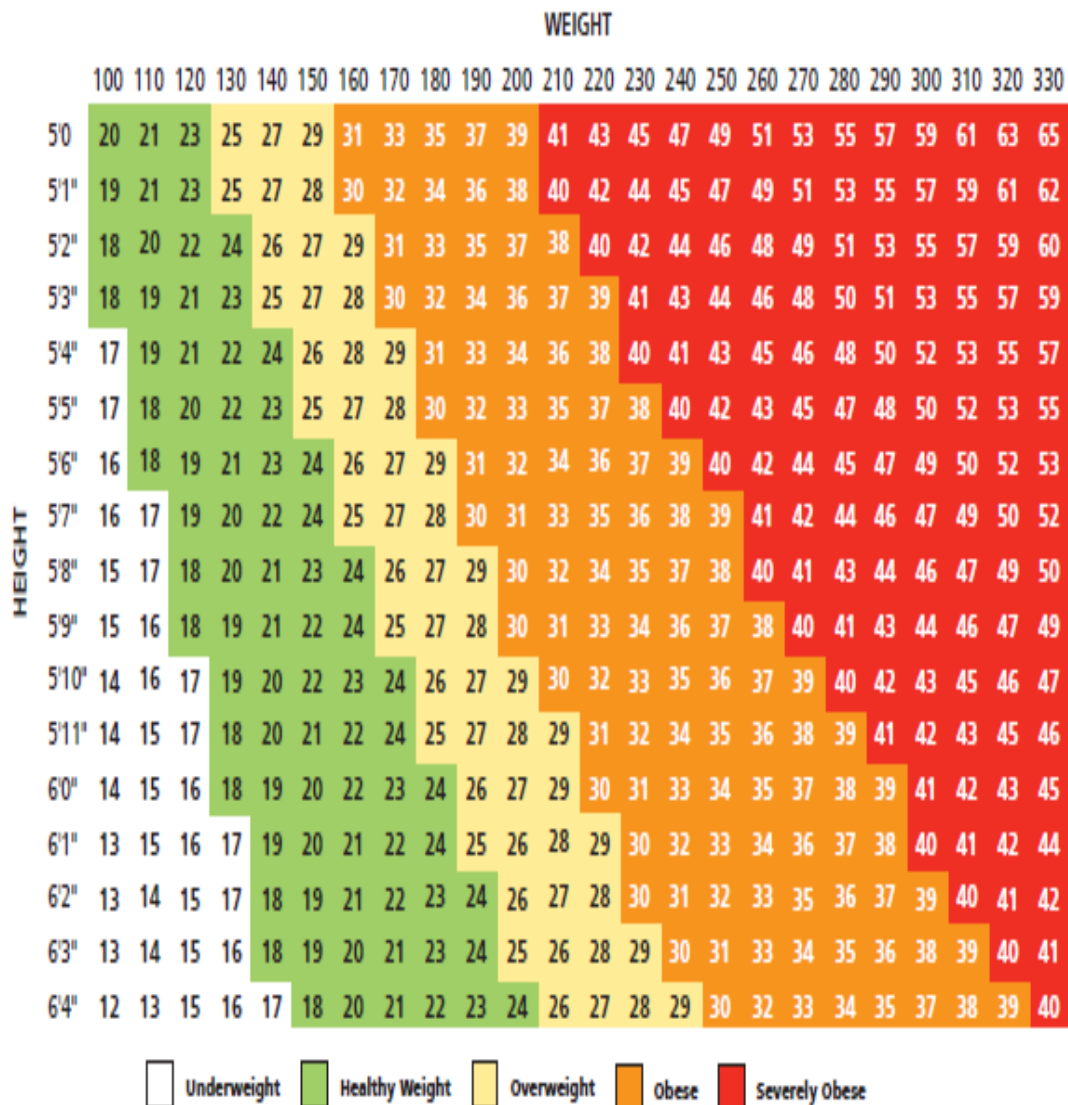
7.3 Chapter 4 - Documentation Tips: Diabetes

Diabetes documentation and coding will need to include:

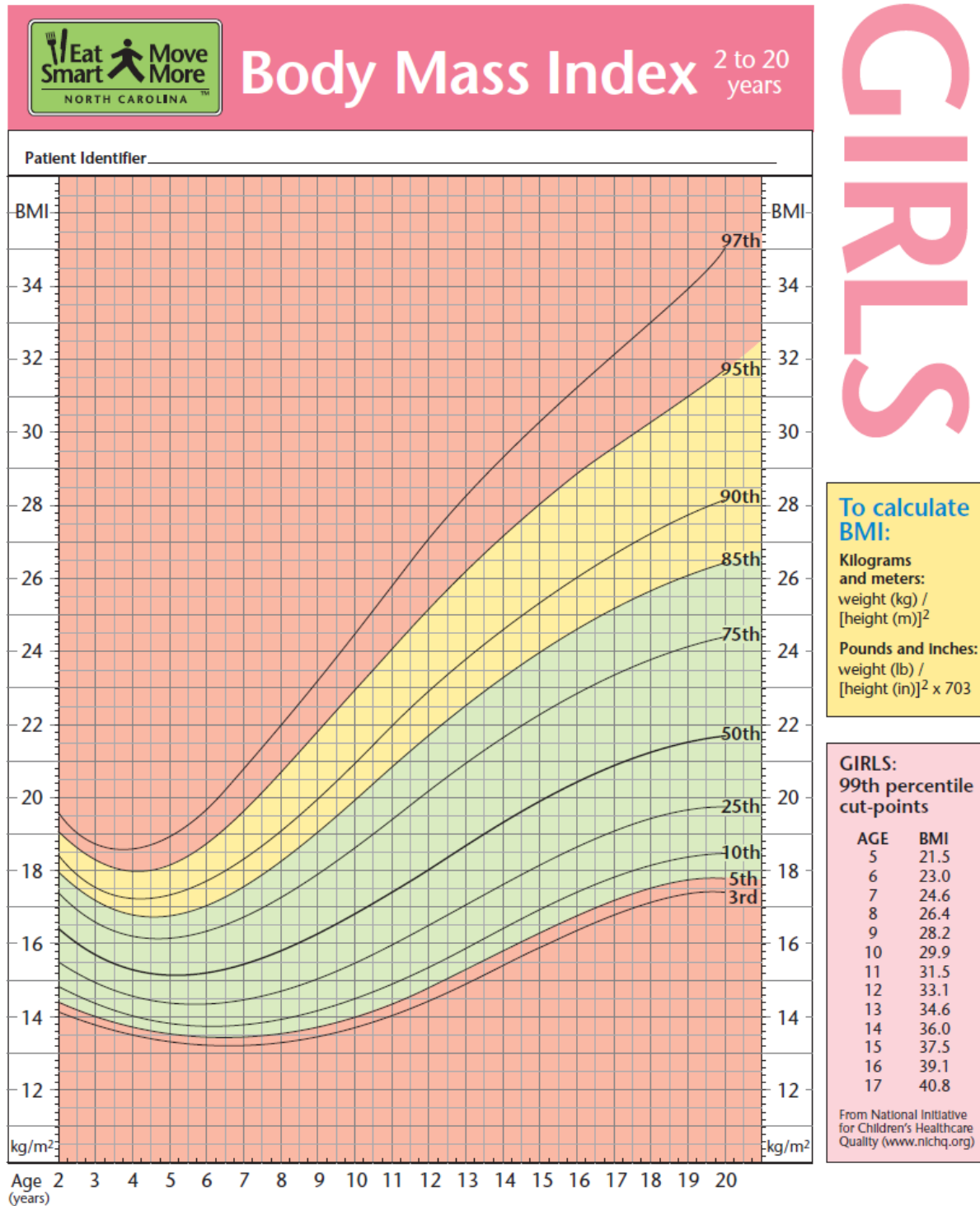
- Types or causes of diabetes:
 - Type 1 (Category E10)
 - Type 2 (Category E11)
 - Due to drugs or chemicals (Category E09)
 - Due to underlying condition (Category E08)
 - Other specified diabetes (Category E13)
- Body system complications related to diabetes, such as kidney or neurological complications
- Combination codes include diabetes and the manifestation
- Specific complications, such as:
 - Chronic kidney disease
 - Foot ulcer
 - Hypoglycemia without coma
- If diabetes mellitus is due to the surgical removal of all or part of the pancreas (postpancreatectomy)
 - Assign code E89.1, Postprocedural hypoinsulinemia as first-listed
 - Assign secondary code from category E13, Other specified Diabetes Mellitus
 - Assign secondary code from subcategory Z90.41-, Acquired absence of pancreas
 - Assign secondary code for long term insulin use, Z79.4
- Controlled and Uncontrolled are no longer a factor in Diabetes Mellitus code selection
 - Uncontrolled is now coded Diabetes Mellitus (by type) with hyperglycemia

7.4 Chapter 4 – Body Mass Index - Adults

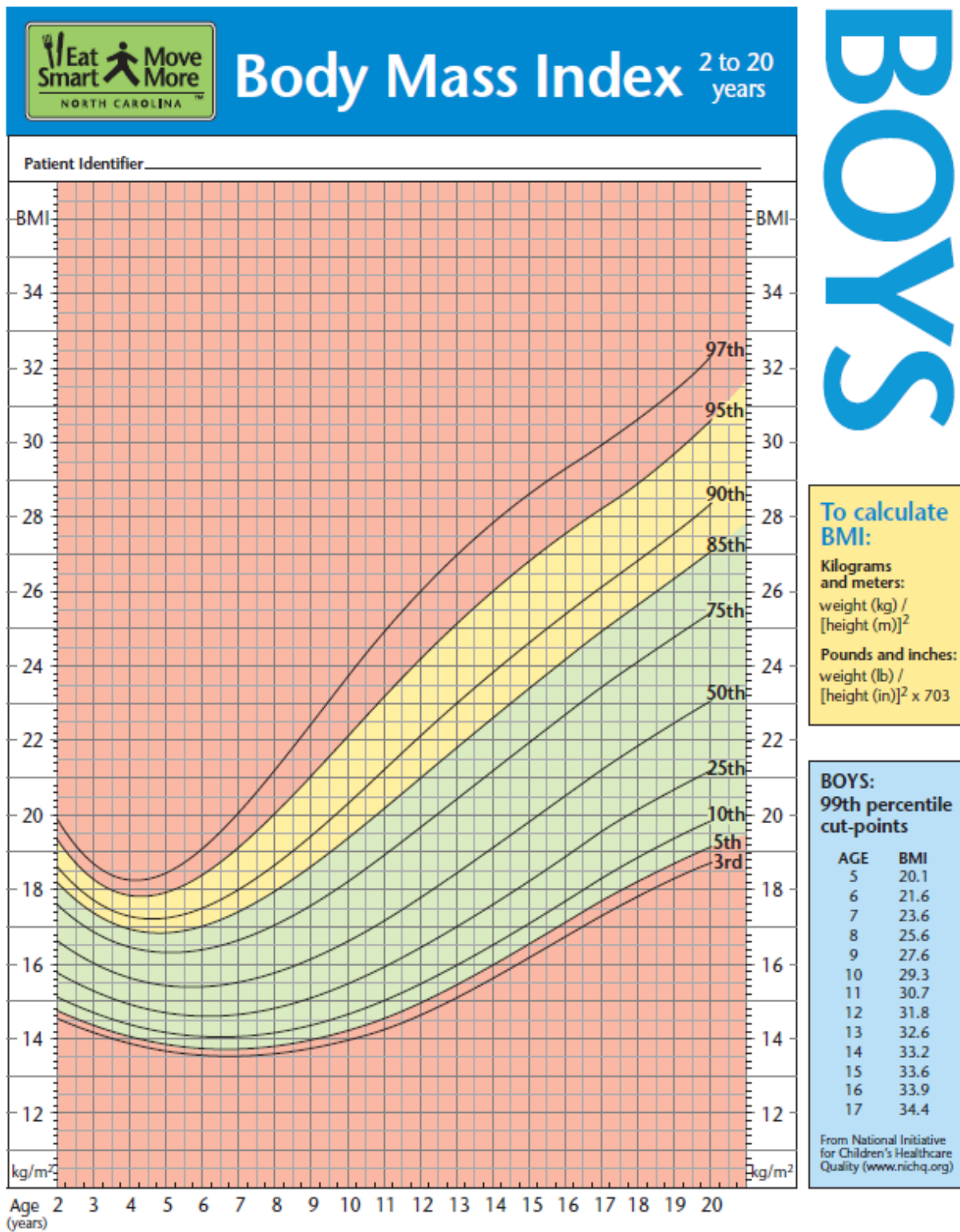
Find the column closest to your weight in pounds. Read down the column until it crosses the row that most closely matches your height in feet and inches. That number is your Body Mass Index. The healthiest BMI range for adults is 18 to 24.



7.5 Chapter 4 – Body Mass Index - Children



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7.6 Chapter 9: Coding Tips – Dominant/Nondominant

For codes that specify laterality with dominant or nondominant, and the classification system does not indicate a default, code selection is as follows:

- For ambidextrous patients, the default should be dominant
- If the left side is affected, the default is non-dominant
- If the right side is affected, the default is dominant

7.7 Chapter 10: Documentation Tips – Asthma

- Clarify the relationship between COPD, bronchitis, and asthma
 - ICD-10-CM distinguishes between uncomplicated cases and those in exacerbation
 - Acute exacerbation is a worsening or decompensation of a chronic condition
 - An acute exacerbation is not equivalent to an infection superimposed on a chronic condition
- An additional code can be used regarding exposure to or use of tobacco
- Incorporate the following scales into documentation templates or queries
 - The National Heart, Lung, and Blood Institute (NHLBI) asthma severity classification scale accounts for the progressive nature of asthma by measuring it across the dimensions of types of symptoms and lung function
 - Mild intermittent
 - Mild persistent
 - Moderate persistent
 - Severe persistent

7.8 Chapter 10: NHLBI Asthma Severity Classification Scale

Presentation of Asthma before (without) Treatment			
Type of Asthma	Symptoms	Nighttime Symptoms	Lung Function
Severe persistent	<ul style="list-style-type: none"> Continual symptoms Limited physical activity Frequent exacerbations 	Frequent	<ul style="list-style-type: none"> FEV₁ or PEF \leq 60% predicted PEF variability > 30%
Moderate persistent	<ul style="list-style-type: none"> Daily symptoms Daily use of inhaled short-acting beta₂-agonist Exacerbation of affect activity Exacerbation \geq 2 times/week \geq 1 day(s) 	> 1time/week	<ul style="list-style-type: none"> FEV₁ or PEF 60-80% predicted PEF variability > 30%
Mild persistent	<ul style="list-style-type: none"> Symptoms > 2 times/week but < 1 time/day Exacerbation may affect activity 	> 2 times/month	<ul style="list-style-type: none"> FEV₁ or PEF \geq 80% predicted PEF variability 20-30%
Mild intermittent	<ul style="list-style-type: none"> Symptoms \leq 2 times/week Asymptomatic and normal PEF between exacerbations Exacerbations of varying intensity are brief (a few hours to a few days) 	\leq 2 times/month	<ul style="list-style-type: none"> FEV₁ or PEF \geq 80% predicted PEF variability < 20%
<p>FEV₁ = The maximal amount of air a person can forcefully exhale over one second accounting for the variables of height, weight, and race used to denote the degree of obstruction with asthma</p> <p>PEF= Peak Expiratory Flow is the maximum flow of expelled air during expiration following full inspiration (big breath in and then big breath out)</p> <p>Source: National Heart, Lung, and Blood Institute - http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.htm</p>			

7.9 Chapter 15 - Documentation Tips

- Documentation of conditions/complications of pregnancy will need to specify the trimester in which that condition occurred.
 - Some codes but not all specify trimester.
- ICD-9-CM documentation required “episode of care” (delivered, ante-partum, post-partum) instead of trimester, childbirth, puerperium
- If the condition develops prior to admission, the trimester at the time of admission is assigned.
- If the patient is hospitalized during one trimester and a condition/complication develops during the same hospitalization but in a subsequent trimester, the code for the trimester in which the complication develops is assigned.
- The provider’s documentation of “weeks” may be used to assign appropriate code for trimester.
- Definition of trimesters
 - First trimester = less than 14 weeks, 0 days
 - Second trimester= 14 weeks, 0 days to less than 28 weeks, 0 days
 - Third trimester = 28 weeks until delivery
- Gestational diabetes needs specification of diet controlled or insulin controlled. If both diet and insulin controlled, the code for insulin controlled will be assigned.

7.10 Chapter 15 – ICD-9/ICD-10 Comparison of Gestational Diabetes

ICD-10	ICD-9
INDEX: Diabetes, gestational (in pregnancy) O24.419 affecting newborn P70.0 diet controlled O24.410 in childbirth O24.429 diet controlled O24.420 insulin (and diet) controlled O24.424 puerperal O24.439 diet controlled O24.430 insulin (and diet) controlled O24.434	INDEX: Diabetes, gestational 648.8 Complicating pregnancy, childbirth, or puerperium 648.8
TABULAR: O24.4 – Gestational Diabetes Mellitus Diabetes mellitus arising in pregnancy Gestational diabetes mellitus NOS O24.41 – Gestational Diabetes in PREGNANCY O24.410 – ...diet controlled O24.414 – ...insulin controlled O24.419 – ...unspecified control O24.42 – Gestational Diabetes in CHILDBIRTH O24.420 – ...diet controlled O24.424 – ...insulin controlled O24.429 – ...unspecified control O24.43 – Gestational Diabetes in PUERPERIUM O24.430 – ...diet controlled O24.434 – ...insulin controlled O24.439 – ...unspecified control	TABULAR: 648.8 – Abnormal Glucose Tolerance Conditions classifiable to 790.21-790.29 Gestational Diabetes [0-4] (5th Digits to Denote Current Episode of Care) .0 – unspecified as to episode of care or N/A .1 – delivered, w/ or w/o mention of antepartum condition .2 – delivered, with mention of PP complication .3 – antepartum condition or complication .4 – postpartum condition or complication (NOTE) 790.21 – impaired fasting glucose 790.22 – impaired glucose tolerance test (oral) 790.29 – other abnormal glucose

- Gestational diabetes occurs during the 2nd and 3rd trimester of pregnancy in women who were not diabetic prior to pregnancy
- Codes for gestational diabetes are in subcategory **O24.4-, Gestational diabetes mellitus**
 - No other code from category **O24, Diabetes mellitus in pregnancy, childbirth, and the puerperium**, should be used with a code from **O24.4**
 - O24.4- includes codes for diet controlled and insulin controlled
 - If a client with gestational diabetes is treated with both diet and insulin, only the code for insulin-controlled is required
 - Code Z79.4, Long-term (current) use of insulin, **should not** be assigned with codes from subcategory O24.4-
 - Current episode of care (used in ICD-9-CM) is no longer needed
- An abnormal glucose tolerance in pregnancy is assigned a code from subcategory **O99.81-, Abnormal glucose complicating pregnancy, childbirth, and the puerperium**

7.11 Chapter 20 – Injury Coding Tips

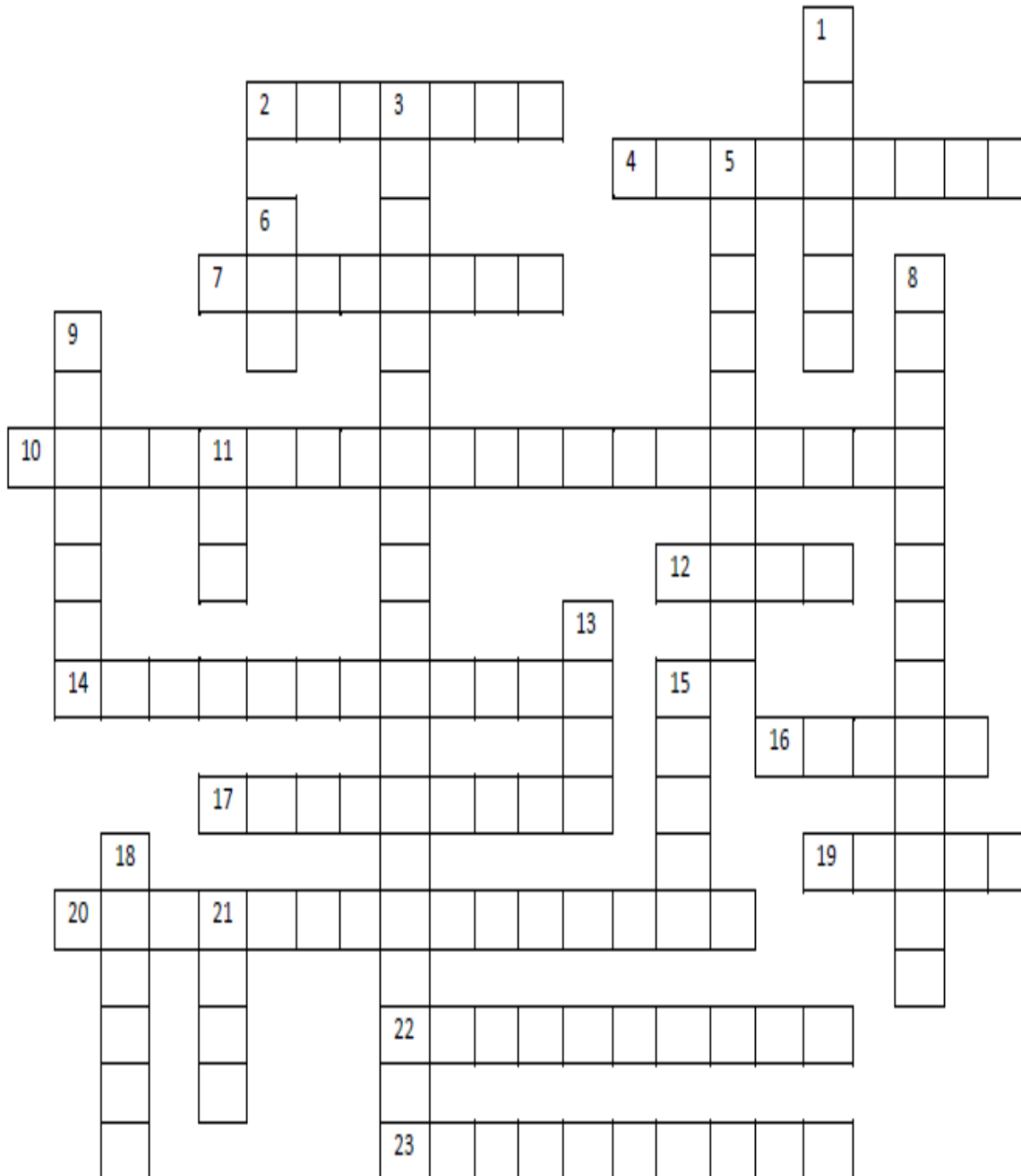
- Initial encounters generally require four secondary codes from Chapter 20
 - External cause codes – utilize 7th character extension
 - Initial encounter (A)
 - Subsequent encounter (D)
 - Sequelae (S)
 - Example: X11.xxxA Contact with hot tap water
 - Place of Occurrence – initial encounter only
 - Example: Y92.210 Daycare center as the place of occurrence of the external cause
 - Activity Code – initial encounter only
 - Example: Y93.D9 Activity, involving arts and handcrafts
 - External Cause Status – initial encounter only
 - Example: Y99.8 Other external cause status (includes Student activity)

7.12 Part 4: Childhood Illnesses and Diseases

Crossword Puzzle

Refer to questions on following page

CHILDHOOD ILLNESSES AND DISEASES



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ACROSS

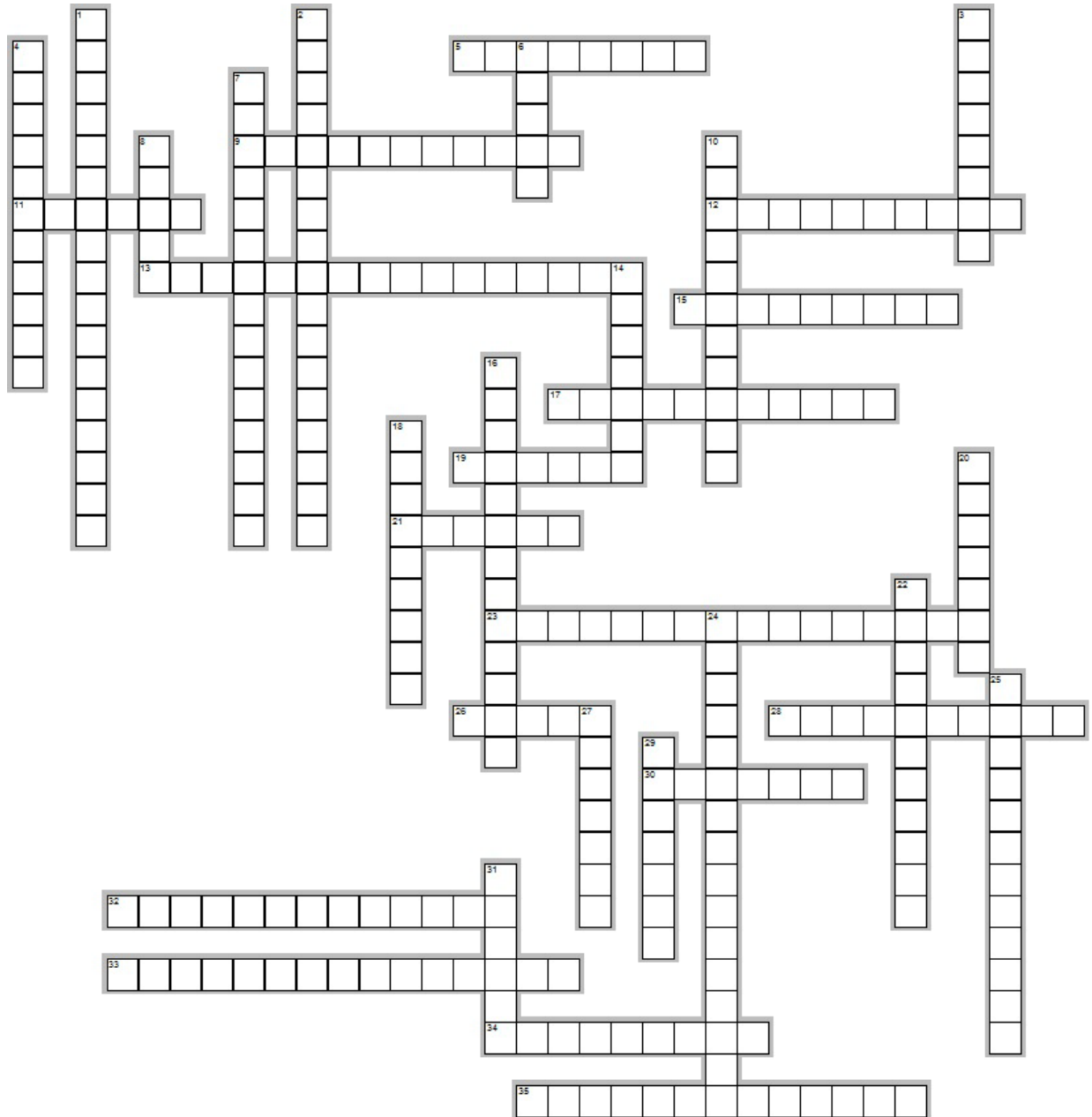
2. Exanthem subitum; Sixth Disease; 3-day fever
4. Irritation and swelling of the liver; most common in children is the “infectious” (type A)
7. “School sores;” blisters with pus on face, neck, and hands; very contagious; caused by staph or strep bacteria
10. Syndrome manifested by fever, blisters/sores in palms, foot, & inside of mouth; Coxsackie A & enterovirus 71 are most common causes
12. Pediculosis infestation
14. Scarletina; rash has “sandpapery feel;” strawberry tongue”
16. Also known as “acute coryza, nasopharyngitis, or rhinopharyngitis;” most commonly caused by rhinovirus
17. Chickenpox
19. Laryngotracheobronchitis; characterized by breathing difficulty and “barking” cough
20. Rare condition involving inflammation of blood vessels; “infantile polyarteritis;” “mucocutaneous lymph node syndrome”
22. Throat pain; common symptom of acute pharyngitis
23. Infection of the membranes covering the brain and spinal cord; classic symptoms are headache, neck stiffness and photophobia

DOWN

1. Inflammation of airways; triggered by breathing allergens; characterized by wheezing, cough, shortness of breath and chest tightness
3. Fifth Disease; “slapped cheeks”
5. Bacterial disease causing a cough with “whooping sound”
6. Autoimmune destruction of B-cells of the pancreas; insulin-dependent, juvenile onset
8. Rare but serious condition affecting brain and liver; associated with aspirin use during a viral illness
9. Easily-spread skin disease caused by very small type of mite; colloquially known the “seven year itch”
11. Seasonal Influenza
13. Infection from resistant strains of bacteria called *Staphylococcus aureus*; high risk of contact in day care centers, playgrounds, and other school-setting
15. Painful swelling of salivary glands; “epidemic parotitis”
18. Dental cavities; tooth decay
21. Childhood hyperkinesis; characterized by inattention, hyperactivity, and impulsivity

7.13 Part 4: ENT Crossword Puzzle

Refer to questions on following page



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Across

- 5. Ringing in one or both ears due to aging or noise exposure damage
- 9. Middle ear infection
- 11. "Voice box"; involved in phonation, breathing & protecting the trachea from food/liquid aspiration; houses the vocal cords
- 12. Thin/leaf-like cartilaginous structure at the root of the tongue & in front of the larynx; it folds backwards covering the larynx to prevent food/liquid from entering the trachea & lungs during the act of swallowing
- 13. "Ossicular auditus"; small bones of the middle ear made up of stapes, incus & malleus
- 15. Difficulty in swallowing; may be associated with pain
- 17. Partition of bone & cartilage between the nasal cavities
- 19. "Stirrup"
- 21. Collection of lymphoid tissue (pair) located at the rear of the throat; acts as filters to bacteria & other germs to prevent infection
- 23. "Eardrum"; cone-shaped membrane separating the external ear from the middle ear; transmits vibration of sound waves
- 26. "Anvil"
- 28. Two pairs of mucomembranous folds in the larynx involve in voice production; upper pair=false, lower pair=true
- 30. Mass of soft tissue behind the nasal cavity; part of the immune system; present at birth & childhood but disappears in adulthood (in most people)
- 32. Type of skin cyst (epidermal inclusion cyst) in the middle ear &/or mastoid process caused by birth defect or more commonly a complication of chronic ear infection; benign condition
- 33. Disorder of the inner ear; common symptoms include tinnitus, vertigo, pain and hearing loss; affects only one ear - no known cause
- 34. Nosebleeds; common condition due to breakage of tiny blood vessels in the nose; due to trauma ,congestion from allergy, sinus infection or colds
- 35. Inflammation of the inner ear; usually occurring after an upper respiratory infection or bacterial ear infection

Down

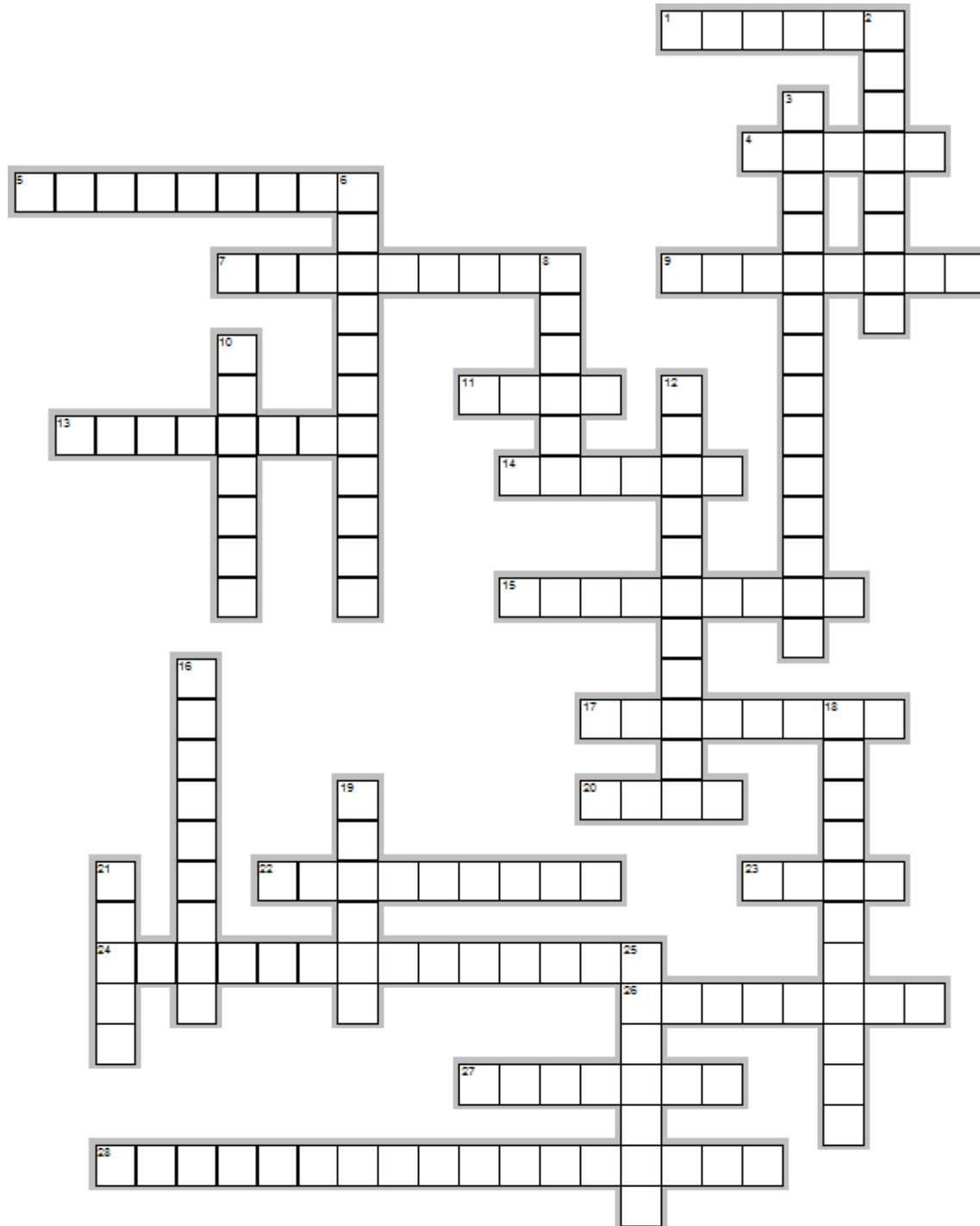
- 1. Three tiny circular tubes/ducts (lateral/superior/posterior) in the inner ear containing fluid (endolymph); helps maintain balance & equilibrium
- 2. Cranial Nerve 8
- 3. Inflammation & irritation of the nasal mucous membrane; common symptoms are stuffy & runny nose & post-nasal drip; triggered by an allergen-i.e. pollen;
- 4. Inflammation of the tonsils caused by an infection
- 6. "Nostril"; one of the external openings to the nasal cavity in the nose which allows air to flow through the cavities to the pharynx
- 7. Benign, slow-growing on the nerve that connects the ear to the brain; symptoms include hearing loss, vertigo & tinnitus

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- 8. Outer ear/auricle; ridged cartilage, funnels sound to the external auditory canal
- 10. Most common ear problem due to age
- 14. Connected system of hollow cavities in the skull; normally empty except for a thin layer of mucus; types include maxillary, frontal, ethmoid & sphenoid
- 16. "Swimmer's ear"; outer ear infection
- 18. Central part of the osseous labyrinth, oval in shape; inner organ for balance & equilibrium; houses the utricle & saccule
- 20. Shell-shaped structure containing receptor (hair) cells; divided into compartments by membranes (basilar & Reissner's)
- 22. Protruding soft, painless, non-cancerous growth in the lining of the nose or sinus; arise from inflammation in the nose & often related to allergies; large & multiple ones lead to breathing problems & infection; recurs even when treated
- 24. Built up of earwax in the ear canal leading to hearing loss, pain or dizziness
- 25. Sensory organ of hearing
- 27. Horse/harsh sound that occurs when one is sleeping due to partially obstructed breathing; may indicate serious health condition; common in overweight & older people
- 29. "Hammer"
- 31. Roof of the mouth; consist of anterior bony (hard) portion & posterior muscular (soft) portion; separates the oral cavity from the nasal cavity

7.14 Part 4: Anatomy of the Eye and Common Disorders Crossword Puzzle

Refer to questions on following page



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Across

1. Tough outer coat that protects the entire eyeball
4. Depression at the center of the macula; point of greatest visual activity
5. "Lazy eye"
7. Chamber located at the back of the eye's interior containing the vitreous humor
9. Increase pressure inside the eye causing reduction in the vision
11. Colored part of the eye; responsible for regulating the amount of light entering the eye
13. Double vision
14. Portion at the center of retina that processes sharp, clear vision
15. Farsightedness
17. Tiny spots/specks that floats across the visual field
20. Tender red bump on the edge of the eyelid due to a bacterial infection
22. Inflammation/infection of cornea
23. Transparent structure which focuses light rays into the retina
24. Light sensitive nerve cells (rods & cons) located in the retina
26. Clouding of the lens preventing passage of light
27. Iritis
28. "Curtain falling over the eye"-most serious retinal symptom leads to blindness

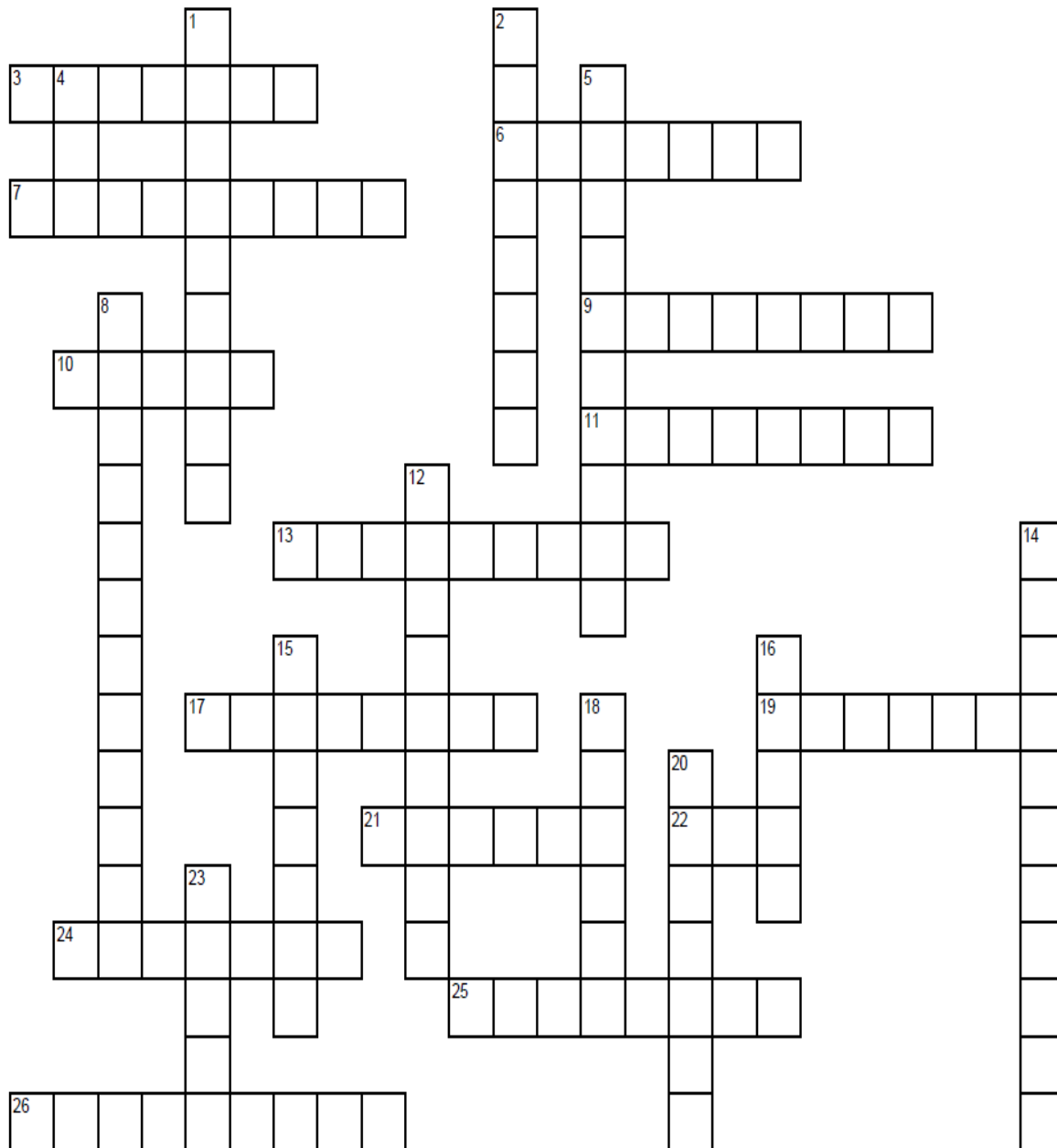
Down

2. Chamber located in the front section of the eye's interior containing the aqueous humor
3. "Pink eye"
6. Error of refraction causing an inability to properly focus light into the retina
8. Light-sensitive layer of tissue (nerve cells) lining the back of the eye
10. Layer behind the retina containing blood vessels that nourishes the retina
12. Located above the lens producing aqueous humor
16. Inflammation of a blocked meibomian gland
18. A complication of diabetes damaging blood vessels in the eyes
19. Clear, dome-shaped surface covering front of the eye
21. Dark center/opening in the middle of iris through which light passes to the back of the eye
25. A blind or dark spot in the visual field

7.15 Part 4: Congestive Heart Failure Crossword Puzzle

Refer to questions on following page

Congestive Heart Failure



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ACROSS

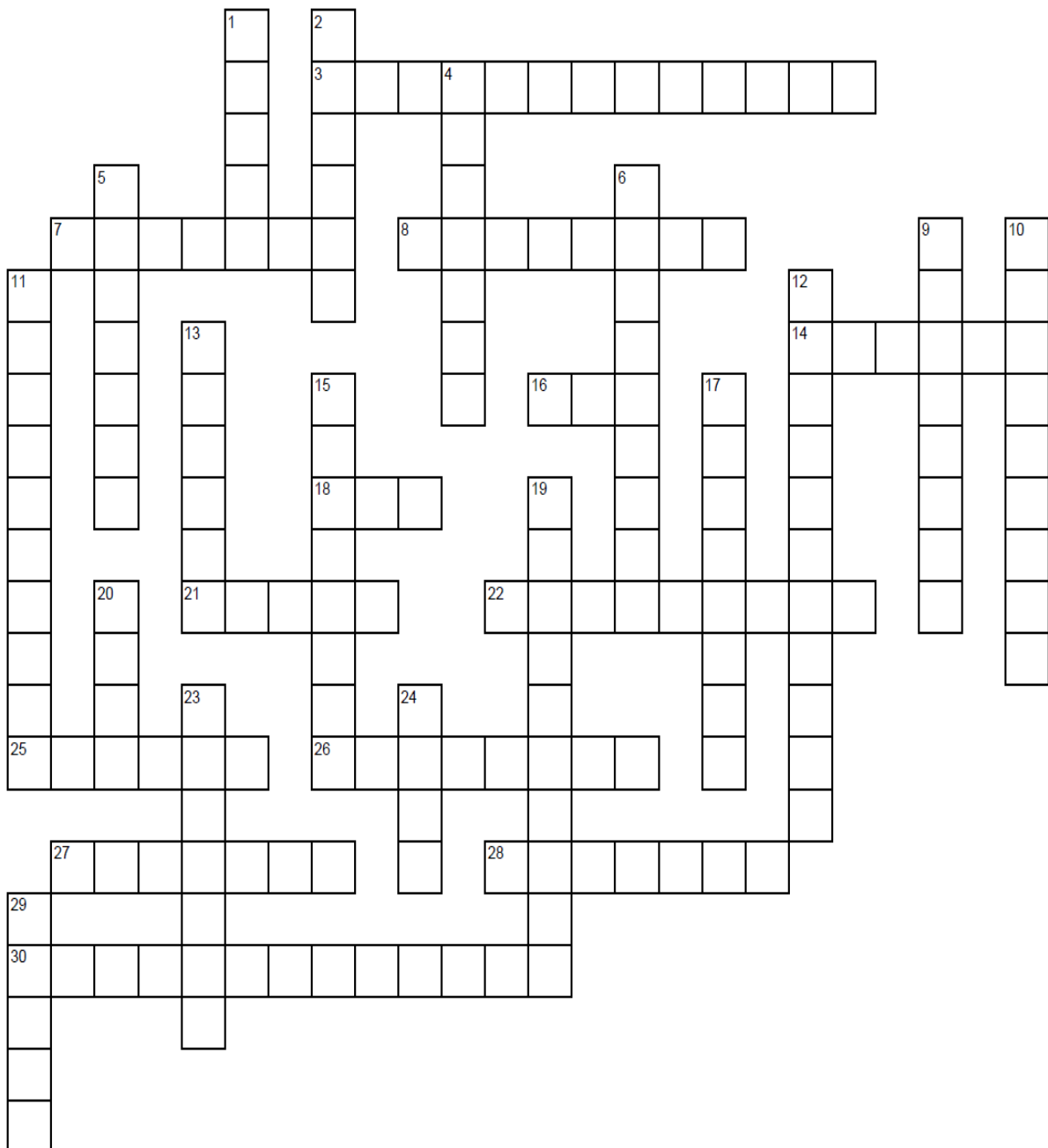
- 3 Another term for fatigue, it is a sign of mild CHF
- 6 A lifestyle risk factor for CHF that is one of the most serious public health issues of the 21st century
- 7 This pumps blood to the lungs
- 9 A common blood thinner
- 10 Generic for Furosemide, a common diuretic
- 11 This type of heart scan is a test for CHF
- 13 A common beta-blocker for those with CHF
- 17 A metabolic disease characterized by high blood sugar that is a CHF risk factor
- 19 This type of abuse is a lifestyle factor for CHF
- 21 Indicates urinary output, this profile is a test for CHF
- 22 This type of scan maybe performed to evaluate for CHF
- 24 Collection of fluid inside the abdomen, a symptom of severe CHF
- 25 Appearing yellow, it is a physical finding of CHF
- 26 Another term for angina, it is a sign of serious CHF

DOWN

- 1 These remove excess fluids from the body
- 2 Having an extremely low body mass, it is a sign of moderate CHF
- 4 These inhibitors help the heart work efficiently
- 5 This is the main form of treatment for CHF
- 8 Abnormal heart beats, a sign of serious CHF
- 12 This difficulty is a symptom of severe CHF
- 14 High _____ is a risk factor for CHF
- 15 Its generic name is enalapril, a common ACE inhibitor
- 16 This type of pulse is a physical finding of CHF
- 18 This therapy may be used to treat CHF
- 20 This cessation is always a recommendation
- 23 This atrium receives oxygen poor blood

7.16 Part 4: Lower Extremities Crossword Puzzle*Refer to questions on following page*

Lower Extremities



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ACROSS

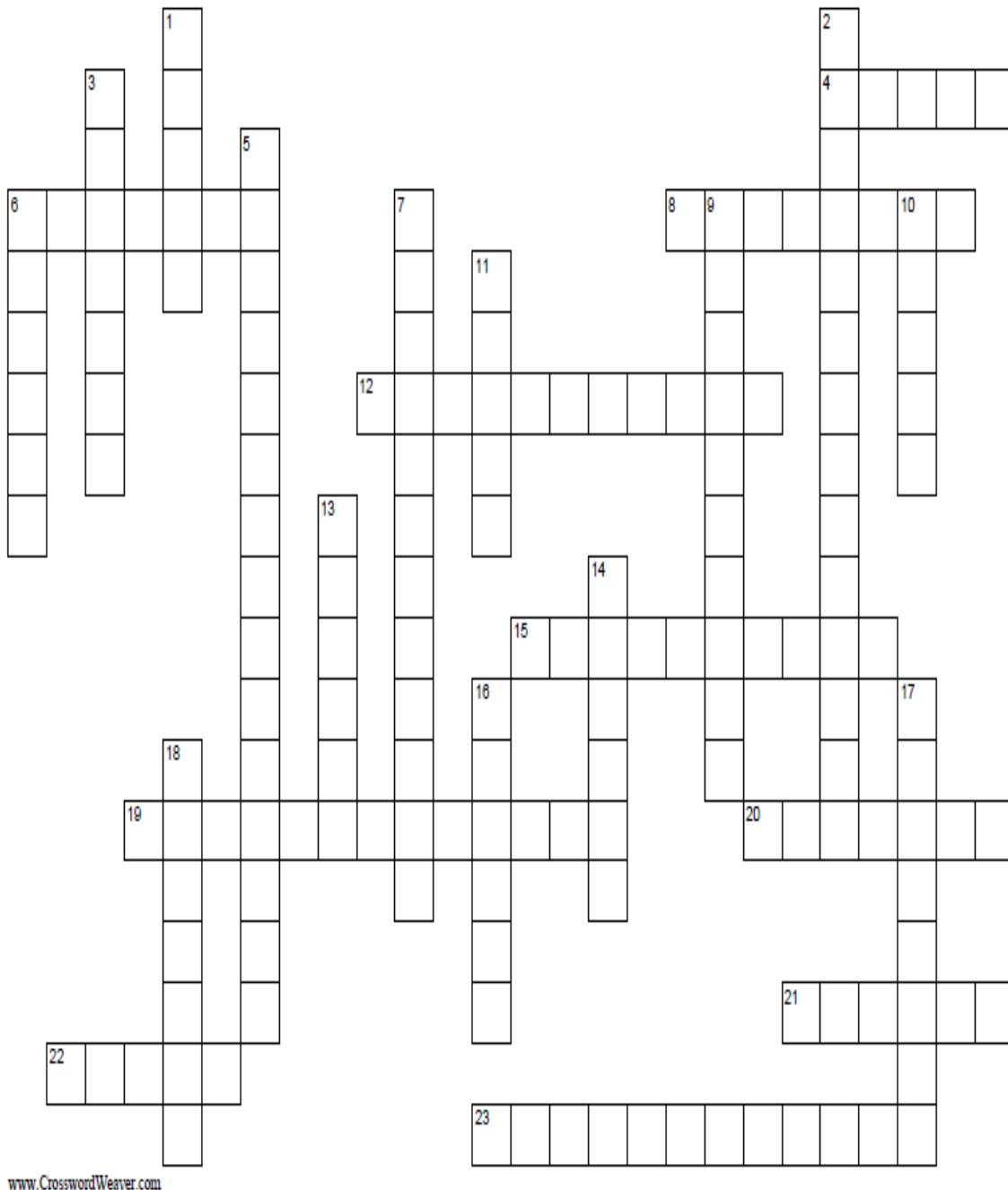
- 3** This ligament reinforces the posterior aspect of the hip joint attaching to the ischium and femur
- 7** The ligament that travels from the outer surface of the femur to the fibula
- 8** The muscles that attach to the posterior surface of the large flat area of the pelvis
- 14** The abdominus muscle known as the six-pack
- 16** The number of large bones that connect to form the pelvis
- 18** Short for anterior cruciate ligament
- 21** The shin bone
- 22** Muscle that flexes the knee joint
- 25** This ligament runs along the inner surface of the femur and tibia
- 26** Membrane that provides nourishment to the knee joint capsule
- 27** The gluteus muscle of the upper buttock
- 28** Another name for knee cartilage
- 30** A quad muscle that flexes the hip and straightens the knee

DOWN

- 1** The thigh bone
- 2** The outer shin bone
- 4** This cartilage at the head of the femur and acetabulum allow the joint to move smoothly
- 5** The kneecap
- 6** A muscle across the thigh that assists in movement
- 9** The oblique muscles at the sides of the stomach
- 10** The ligament travels from the posterior surface of the tibia to the anterior surface of the femur
- 11** Along with the femur this forms the hip joint
- 12** Close to the top of the femur, these two protrusions function for muscle attachment
- 13** The hip joint is a ball and _____ joint
- 15** The long groin muscle which helps adduct the hip
- 17** The ligament that forms a cross in the middle of the knee joint
- 19** Four muscles that attach inferiorly to the tibial tuberosity of the shin
- 20** The part of the femur which articulates with the pelvis
- 23** The largest gluteus muscle
- 24** The largest joint in the body
- 29** A group of three muscles also known as the adductor muscles

7.17 Part 4: Gastrointestinal Crossword Puzzle*Refer to questions on following page*

Gastrointestinal Puzzle



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ACROSS

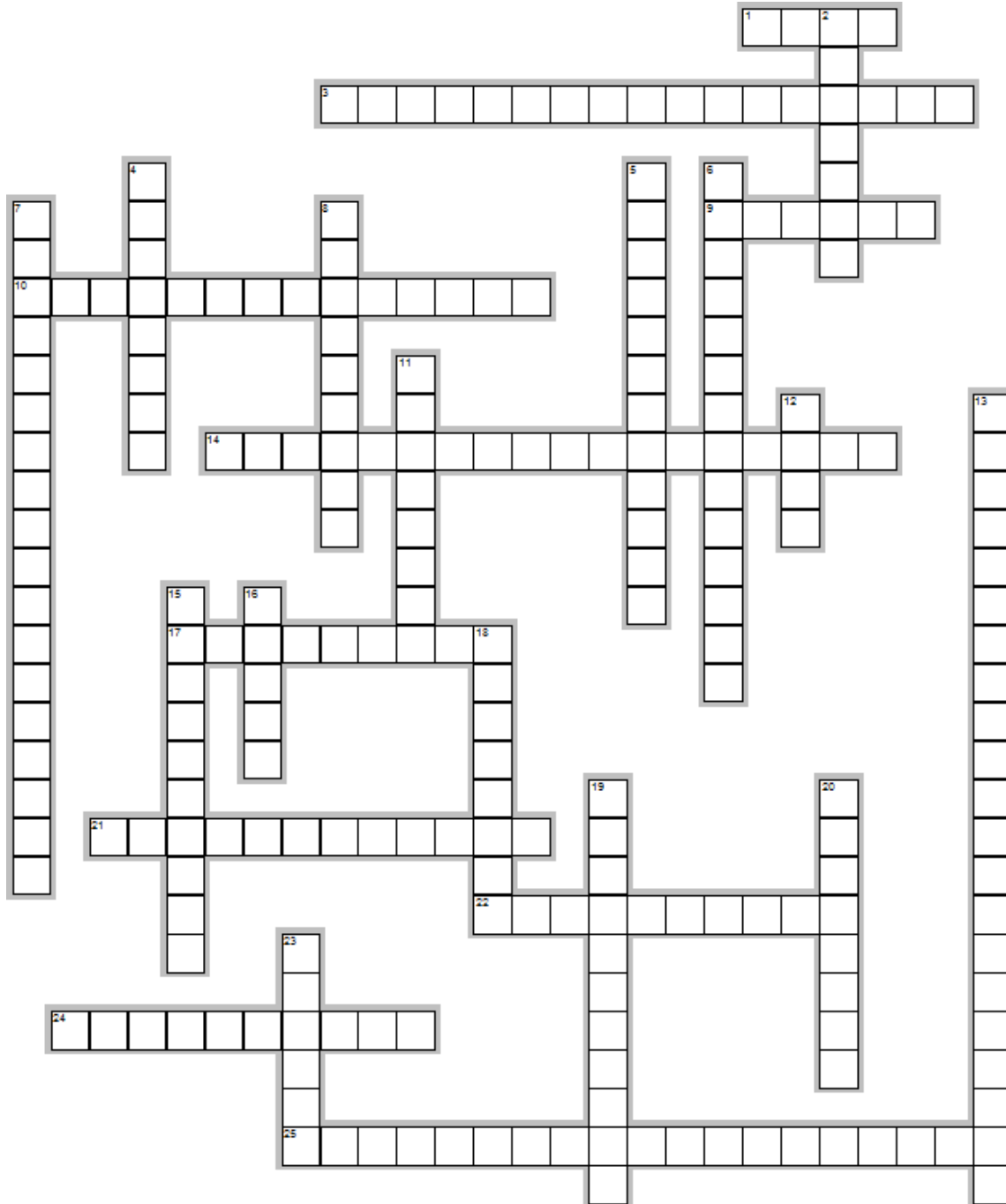
- 4 Absorbs B12 in the small intestine
- 6 An infection of the small intestine caused by the bacteria *Vibrio Cholerea*
- 8 Appears to be a unified organ, but is often divided into two parts
- 12 An acute viral hemorrhagic disease transmitted by female mosquitoes
- 15 Popularly known as beaver fever
- 19 An autoimmune disease of the small intestine
- 20 A hormone released in the GI tract
- 21 Then number of feet in an adult males GI tract
- 22 Attaches the vermiform appendix
- 23 An inflammation of the pancreas

DOWN

- 1 The number of hours after a meal for the stomach to dump 50% of contents into the intestine
- 2 An inflammation of the pouches on the outside of the colon
- 3 The gastrointestinal tract includes the intestines and _____
- 5 Also known as the stomach flu
- 6 A disease also known as regional enteritis
- 7 An inflammation of the appendix
- 9 A form of colitis that involves large open sores within the colon
- 10 The GI tract made up of the esophagus, stomach and duodenum
- 11 Its main function is to absorb water
- 13 The most common ulcer of the digestive tract
- 14 A malignant neoplasm
- 16 The ligament of _____ is used to divide the upper and lower GI tracts
- 17 The GI tract releases _____ to regulate the digestive process
- 18 Midsection of the intestine

7.18 Part 4: Anatomy and Common Problems of the Skin Crossword Puzzle

Refer to questions on following page



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Across

1. Small & usually painless skin growth caused by type of virus called HPV
3. "Lamellar corpuscle;" mechanoreceptor responsible for sensitivity to touch/vibration & pressure
9. Form of dermatitis/inflammation causing an itchy rash; "Atopic dermatitis" (to boil over) most common form
10. "Horned or corneal layer;" outermost layer of the epidermis providing vital barrier function
14. Touch receptors located near the skin surface; "Tactile corpuscle"
17. Upper/outer, nonvascular, nonsensitive layer of the skin made up of squamous cells, basal cells, and melanocytes
21. Tubular infolding of the epidermis containing root of a hair
22. Coiled tubular subcutaneous gland that secretes sweat; "Sudoriferous gland"
24. "Subcutis;" innermost and thickest layer of the skin containing nerves, blood vessels, and fibroblasts; cushions the body and regulates skin and body temperature
25. "Basal layer;" deepest layer of the epidermis, providing germinal cells for regeneration

Down

2. Very common skin condition characterized by (a) redness on nose, cheeks, forehead, and chin; (b) small visible blood vessels on the face; (c) bumps/pimples on the face; d) watery, irritated eyes
4. Most dangerous type of skin cancer; begins in a mole or other pigmented tissue such as the eyes
5. Microscopic band of muscle tissue connecting a hair follicle to the dermis; contraction causes the hair to stand on end
6. Gland that secretes oily/waxy matter ("sebum") that lubricates and waterproofs the skin
7. Most common form of skin cancer that begins in the basal cell; appears as shiny, pearly nodule; almost never metastasizes
8. Chronic skin problem which causes cells to grow too quickly resulting in thick, white, silvery or red patches
11. "Dermatophytosis;" skin infection caused by fungus, easily spread from person to person
12. Occurs when hair follicles become plugged with oil and dead skin cells
13. Non-melanoma type of skin cancer; earliest form is called "Bowen's Disease"
15. Inflammation of the skin
16. "Urticaria;" sudden outbreak of swollen, itchy, pale red bumps/plaques resulting from allergic or non-allergic cause
18. "Zona;" painful skin rash with blisters caused by varicella zoster virus, usually appearing as a band/strip or small area on one side of the body or face
19. Specialized skin cells that produce skin-darkening pigment (melanin), located in the bottom layer of the epidermis
20. Chronic scalp condition marked by itching and flaking of the skin; shedding of dead skin all from the scalp
23. Inner layer of the skin containing blood and lymph vessels, hair follicles, sweat and sebaceous glands

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